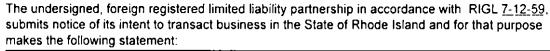
RI SOS Filing Number: 201880907290 Date: 11/7/2018 12:11:00 PM



Notice of Registration

FOREIGN Limited Liability Partnership

→ Filing Fee: \$1,000.00





The name of the foreign limited liability partnership shape in the shape is a second of the shape in the shape is a second of the shape in the shape is a second of th	all be:			
Adler, Cohen, Harvey, Wakeman & Guekguezian, LLP				
The name, if different, under which it proposes to register	r and transact business in Rhod	e Island is:		
The jurisdiction, the laws of which govern its partnersh Limited Liability Partnership, is:	ip agreement and under which i	t is registered as a		
Massachusetts				
3. The address of the principal office is:				
Address 75 Federal Street				
City/Town Boston	State Massachusetts	Zip Code 02110		
4. If the partnership's principal office is not located in Rho agent/office in Rhode Island is:	ode Island, the name and addres	ss of the initial registered		
Agent Name Brian A. Fielding, Adler, Cohen, Harvey,	Wakeman & Guekguezian, LLI	Р		
Street Address (NOT a P.O. Box) 55 Dorrance Street, S	uite 302	<u>.</u>		
City/Town Providence	State RHODE ISLAND	Zip Code 02903		

MAIL TO:

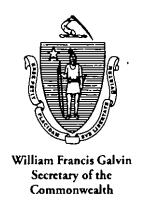
Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri.gov FILED
NOV 0 7 2018

FORM 550 - Revised 11/2017

	all resident partners in Rhode Island is	· · · · · · · · · · · · · · · · · · ·
NAME	ADDRESS	
	· ·	
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		Ob 1, 4b - 1, - 1, 4; - 4; - 4 40 - 4 1
O A b 2 C A A A A A A A A A A A A A A A A A A	-turn turn bird all a see all a see all a see	Check the box to indicate an attachment
	siness in which the partnership is enga	ged:
Legal Services		
		Check the box to indicate an attachment
7. Any other information that t	the partnership determines to include:	,
None		
MOUR		
MOUR		
HOUR		
MOUR		

8. The partnership is a Registered Limited Liability Partnership. The notice shall be effective for 2 (two) years from the date of filing. Upon expiration the Foreign Limited Liability Partnership is responsible for filing a new notice.		
Under penalty of perjury, I/we declare and affirm that I/we Partnership, including any accompanying attachments, as	have examined this Notice of Foreign Limited Liability and that all statements contained herein are true and correct.	
Type or Print Name of Partner	Date	
Michael B. Barkley	11/1/18	
Signature of Partner The 33.33	BOUMENT SERV	
Type or Print Name of Partner	Date	
Signature of Partner	DOUMLINE BERTE	
Type of Print Name of Partner	Date	
Signature of Partner 역당N DC	KUUMENT BERE	



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

September 28, 2018

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of registration of Limited Liability Partnership was filed in this office by

ADLER, COHEN, HARVEY, WAKEMAN & GUEKGUEZIAN, LLP

in accordance with the provisions of Massachusetts General Laws, Chapter 108A on April 17, 1997.

I further certify that said registration has not been withdrawn or revoked; and that, so far as appears of record, said Limited Liability Partnership has legal existence.

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Sccretary of the Commonwealth

BUS SYCS DIV

Francis Galecin

Processed By:TAA

RI SOS Filing Number: 201880907290 Date: 11/7/2018 12:11:00 PM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

November 07, 2018 12:11 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

